

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No.	03500.014598.1
		First Named Inventor or Application Identifier	
		HIDEO UKUDA	
		Express Mail Label No.	

<b>APPLICATION ELEMENTS</b>		<b>ADDRESS TO:</b>	
<p>See MPEP chapter 600 concerning utility patent application contents.</p> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification      Total Pages <b>65</b></p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113)      Total Sheets <b>13</b></p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration      Total Pages <b>1</b></p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i></p> <p>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>			
<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>			
<b>ACCOMPANYING APPLICATION PARTS</b>			
<p>9. <input checked="" type="checkbox"/> Assignment Papers (copy of cover sheet &amp; document(s) from parent case)</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>      <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449      <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Other: _____</p>			

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation     Divisional     Continuation-in-part (CIP) of prior application No. 09/606,522  
*Prior application information:*    Examiner E. Cain    Group/Art Unit: 1714

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS																													
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below																									
<table border="1"> <tr> <td colspan="2">NAME</td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td colspan="3"></td> </tr> <tr> <td colspan="2">Address</td> <td colspan="3"></td> </tr> <tr> <td>City</td> <td></td> <td>State</td> <td></td> <td>Zip Code</td> </tr> <tr> <td>Country</td> <td></td> <td>Telephone</td> <td></td> <td>Fax</td> </tr> </table>					NAME										Address					City		State		Zip Code	Country		Telephone		Fax
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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	20-20 =	20	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	5-3 =	2	X \$ 86.00 =	\$172.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$290.00 =	\$
				BASIC FEE (37 CFR 1.16(a))	\$770.00
				Total of above Calculations =	\$942.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
				TOTAL =	\$942.00

19. Small entity status

- a.  A small entity statement is enclosed
- b.  A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c.  Is no longer claimed.

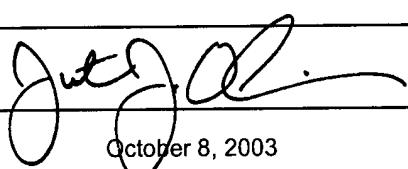
20.  A check in the amount of \$ 942.00 to cover the filing fee is enclosed.

21.  A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a.  Fees required under 37 CFR 1.16.
- b.  Fees required under 37 CFR 1.17.
- c.  Fees required under 37 CFR 1.18.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Justin J. Oliver - Reg. No. 44,986
SIGNATURE	
DATE	October 8, 2003

JJO/tmm

Form #125

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